



SaferWave FAQ's

Integrating SaferWave with sensible precautions

What devices does SaferWave work for?

Biological Effects and Validation of the Problem

What is SaferWave?

Lifetime. Transfer and Installation

SaferWave compared with other devices

Testing and validation approaches.

Who and what is affected?

- Affected Organs

- Adults

- Teens

- Children, babies and in utero

The Home and Office Harmoniser (HoH)

Integrating SaferWave with sensible precautions

Q. I only use hands-free when I talk in my mobile phone. What will Saferwave do for me?

A. That is a foundation for safer use. Separation from the phone reduces the effect of some harmful aspects. However digital signals, the form that phones use, have an effect even at very low intensities. The nature of the digital signal means that even at very low intensities it has a disruptive effect on cell behaviour. *SaferWave* addresses this aspect.

Q. I use Bluetooth- is that not enough?

A. Bluetooth removes the more intense phone signal from the brain area and that is in principle good. However the phone has an effect wherever it is located (although the focus is on the brain, tests show that the weakest organ is also affected e.g. the kidneys, heart). Thus the same *SaferWave* principles apply. Bluetooth signals will have an effect in the head area which will be slowly progressive.

Q. Is SaferWave enough?

A. Tests that compared with other protective devices showed a benefit of 30-50%, compared to SaferWave at 98% average, 100% in some people. SaferWave addresses the main issue, the digital sharp waveforms. However there are other aspects that are partly known or are unknown. This it is just sensible to use other precautions, especially separation.

Q. How do I know SaferWave will work?

A. The problems of phones have been validated by experts in physics and biological physics. It is acknowledged that transients are the primary issue (see *How SaferWave works* in the user manual) and that harmonics and the biologically disruptive effects of sharp peaks are also important. The problems that *SaferWave* addresses are scientifically valid. The demonstration that SaferWave works is by the reduction of effects of your biological operations, at cell level. You have over 70 trillion cells. The clinical tests were undertaken in multiple Scandinavian clinics using the EIS, a medically certified assessment device. (See *Testing SaferWave* in the user manual)

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Q. Where should I carry my phone?

A. Away from all sensitive organs: not in the bra, not in a breast pocket (near the heart), not near the kidneys, not in a male trouser pocket. Keep it as far away from you as possible when practicable.

Q. Surely it is OK to carry when on standby?

A. Even on standby an unprotected phone checks for signals. This has been shown to have an effect on male sperm. With SaferWave this operation is also protected.

Q. Can I keep in my bra when partying?

A. Yes- if it is off! There are validated reports of breast cancer in teens of girls who have carried phones in their bra.

What devices does SaferWave work for?

Q. What phones does SaferWave work for?

A. All phones including iPhone and smart phones.

Q. What PC's does SaferWave work for?

A. All, including laptops, standard and integrated desktops.

Q. Does the operating mode affect efficacy?

A. Yes. We recommend disabling video and internet when not needed as these are higher intensity and Saferwave protection may reduce by 10-20%. All phones have a selection for GSM which is excellent for all operations except movie watching or heavy internet usage. So this is an important practical element

Q. How far does the SaferWave phone protection extend to?

A. SaferWave is designed to protect the user and that specific device. It has an effective radius of about 1 metre. It is not designed for background protection. The Home and Office Harmoniser addresses background protection.

Q. Why is a ferrite bead included?

A. When using a headset/earpiece the cable can act as an amplifying aerial increasing effects of the brain. The ferrite bead stops this effect. It is an added precaution. SaferWave recommends all possible precautions.

Biological Effects and Validation of the Problem

Q. Is there a validation that phones are a problem?

A. Yes. WHO (The World Health Organisation) classifies phones as a Class 2 carcinogen.

Q. Some studies indicate problem, other do not.

A. WHO evaluation considered all robust studies. There is a disparity between manufacturer funded studies and independent ones. It is possible to design a study to prove what you want to show. This is unfortunately the case with many pharmaceutical studies and also with manufacturer financed phone studies. Independent studies, as in the extensive Biofield Report of 600 pages, indicate a problem and one that is accelerating.

Q. I don't have any symptoms from phone use, so why do I need SaferWave protection?

A. Tests indicate that phones have an effect even when you don't experience any effects. We generally only have effects or symptoms when the body is unable to control an issue, is making us aware of this and asking for our help! The effects are progressive, cumulative and when they have added up to a certain level you will experience an effect. The key is to be aware of the potential dangers and follow the "precautionary principle"- assume there is an issue and take sensible protective measures.

Q. Why are some people affected more than others?

A. They have weaker, less stress resilient cells. Phone signals are a stressor, they place a demand on cell activity. When cells become sufficiently weak symptoms are experienced.

Q. Will I feel the difference – before and after effect?

A. This depends on whether you feel any effects when using a phone. Some people experience effects like dizziness or headaches after use. If so then the i approach reduces this for most people. If you do have symptoms the please use all 3 recommendations (*SaferWave* foil, headset with ferrite and the personal safe use aspects like separation).

What is SaferWave?

Q. What is included in a SaferWave Phone System?

A. The SaferWave modifying holograph for phone and a ferrite bead for your headset

Q. What is included in a SaferWave PC System?

A. The SaferWave modifying holograph for the PC and one for the power supply transformer (external for a laptop and in the case for a desktop).

Q. Which is more important- SaferWave or ferrite?

A. One simple precaution is separation, having the phone at a distance as in using hands free on a table. Separation is not always possible.

Q. Will the protection fit my phone?

A. Yes; SaferWave fits all phones.

Q. Is a headset included?

A. No. You will have one with the phone or can purchase one that you like the fit of.

Q. Why is a headset useful?

A. It enables you to increase separation from the phone.

Lifetime. Transfer and Installation

Q. Does it wear out?

A. Abrasion can affect the SaferWave performance. *SaferWave* supplies a protective over-sticker for use on laptops and when used externally on phones (e.g. iPhone) that are used without a protective case.

Q. Does it have a limited life?

A. No. Unlike some devices they have an unlimited working life.

Q. Can I transfer Saferwave?

A. Yes. *SaferWave* mobile phone units are supplied with 4 under-stickers. These are placed on the phone under the *SaferWave* foil. The foil can be removed and applied on another under-sticker on a different phone. This enables relocation between phones when you replace the phone. It is not designed for daily transfer! The ferrite bead can also be undone and transferred.

Q. How do I install SaferWave?

A. The foil is removed from the backing (along with the understicker) and placed in/on the phone or PC. The ferrite bead is clipped onto the headset wire near the phone. It is a simple 2 minute operation.

SaferWave compared with other devices

Q. Is SaferWave better than the other products that say they do the same?

A. Other products do not work on the same principle (patent pending) as SaferWave. They do not address or even pretend to address the same key problem issues that SaferWave does (transients, harmonics, sharp peaked waveforms). If a system does not address the key identified issues it is unlikely to have a significant benefit.

Q. Do absorbers work?

A. Absorbing the waveform means the phone will amplify the signal. A reduction in SAR is not relevant (see below).

Q. Do Shielded pouches work?

A. Radio waves travel round corners- diverting or blocking the signal means the waveform just takes a different route. Even a low strength signal has an effect. A reduction in SAR is not relevant (see below).

Testing and validation approaches.

Q. Is it more important to measure the emitted field or biological effects?

A. Where an effect is felt is most important. EMF affects the human body operation. That is the primary parameter to measure and is what SaferWave testing is based on. Digital signals, the form that phones use, have an effect even at very low intensities. Having a low intensity is in principle beneficial (hence the recommendation of separation). However with phones and PC's it is not possible to adequately reduce the signal strength enough to eliminate biological effects.

Q. Why do you use cell vitality as a foundation for protective effect?

A. Cell operation and thus vitality is fundamental to well being. People with chronic fatigue, the elderly and with compromised health have low cell vitality. Vitality is affected and certain functions are compromised by a variety of stressors including EMF. The device used shows results quickly and reproducibly ($\pm 5\%$), and is a CE Certified Medical Device. It was also used to test other devices on the market as well as being standard clinical assessment tool.

Q. Is SAR a valid measurement technique for evaluating protection?

A. No. It is a measurement of heating effects (like from a microwave cooker). It is important not to fry the brain (or other organs) but non thermal effects occur well below any temperature effect. SAR is controlled by legislation but is not a key parameter; effects occur at well below measurable SAR values. Thus effects are non thermal. Tests that show a reduction in SAR do not mean that biological effects are reduced. Biological tests are needed to validate any protection system.

Q. Can I test it with an EMF meter?

A. No. The key is to reduce the harmful effects without affecting phone performance. That is what SaferWave does. EMF meters measure the intensity or power of a signal. When using a phone the intensity of the signal on the strength bar is important, but for a particular reason. The stronger the signal, the less power the phone needs to use during it most health affecting operation, talking (when the phone is transmitting). If you reduce the power then the phone has an amplifier to increase the signal. This is an inbuilt compensation (and self defeating approach). If you reduce the power the phone may eventually work less effectively.

Q. Other testing approaches

A. Before developing SaferWave a review of the literature and device seller's sites did not reveal any reproducible data. No staged trials (test in an EMF free environment, then with a protected phone, then with an unprotected phone) have been presented. Other test systems that have been used include aura (biofield) measurements, meridian/ acupuncture point measurements, blood clumping tests and kinesiography muscle testing. The body has several layers that have some interconnection. There is the biofield (aura) outside the body,

the acupuncture meridian system near the surface of the body and the physiology (as represented in cell activity.) sufficiently reproducible. Acupuncture meridians are connected with organ vitality and offer a potential for useful information. However systems used for mobile phone testing have an operator controlled measurement probe. The application pressure changes the measurement. It is not independent; it can be manipulated by the operator. Blood tests are often only temporary. Muscle testing results vary with the question asked. EIS testing, as used for SaferWave, are solid, scientific and reproducible.

Who and what is affected?

Affected Organs

Q. Is it just the brain?

A. The brain seems to be the focus as that is where the phone is most often used. It is also, for some reason, deemed the most important organ. Interestingly SaferWave tests, with the phone by the brain, show the most dominant effect in the weakest organ and most frequently the kidney. The brain is sensitive and is one area where tumours form of a style consistent with the location of phone use.

Q. What other organs are affected?

A. The heart, kidneys, breast, adrenals, male and female genitals are the most affected. However phones disrupt cell operation and there are 100 trillion cells everywhere in the body.

Adults

Q. Are all Adults affected?

A. Yes; see above. Adults do seem to have more ability to discriminate in use of phones and PC's.

Teens

Q. Are teens affected more than adults?

A. Yes. Their bodies are still developing and the effects of DNA damage are higher. They also have a very high usage of phones and PC's.

Children, babies and inutero

Q. Why should I not use a phone if pregnant or near a baby or child?

A. Cells use DNA to form the pattern for new cells. If the DNA becomes corrupted less healthy cells are produced. There is substantial evidence that DNA is compromised by mobile phone radiation.

The Home and Office Harmoniser (HoH)

Q. How far does SaferWave PC and phone protection extend?

A. They are designed for local benefit and extend for 1 meter.

Q. Does the HOH protect against individual devices?

A. No. It is designed to deal with background. It will be effective some 2 metres away from device.

Q. What does the HOH protect against?

A. EMF and geopathic tress. It is a background device for all EMF styles: electric fields from cables; magnetic fields from appliances; RF fields from mobile phone antennas and wireless signals.

Q. How far does the background protection extend?

A. For a 70 m radius

Q. How as the HoH tested?

A. It was tested in highly stressed areas independently for EMF and geopathic stress using the Introspect/Oberon device. This shows strain on organs on a 1 to 6 scale.